

Synopsis of
Beyond Disease Management: Creating Emotional Value Through H2h
Marketing in Chronic Disease Medications - A Mixed Method Study of
Patient-Provider Relationships

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by

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Introduction

Chronic diseases like diabetes, hypertension, and asthma are not just long-term health conditions—they reshape patients' emotional lives, routines, and relationships. While clinical treatments focus on controlling symptoms, the emotional struggles of chronic illness—fear, frustration, anxiety, and isolation—often go unaddressed.

This study explores how Human-to-Human (H2H) marketing principles can be applied in chronic disease care to bridge this emotional gap. It emphasizes the value of empathy, active listening, and emotional support in enhancing patient-provider relationships. The study investigates how a shift from transactional care to emotionally engaged care can improve satisfaction, trust, and treatment adherence.

Research Outcomes

- How do chronic disease patients and caregivers perceive emotional support in their healthcare journey?
- What role does H2H marketing play in improving patient-provider relationships?
- Can emotional branding and empathetic communication improve long-term treatment adherence in chronic care?

Objectives

- To understand the emotional and psychological needs of chronic disease patients.
- To evaluate the impact of empathy, trust, and communication in chronic care experiences.
- To assess the perceived effectiveness of H2H marketing in building emotional value.
- To suggest patient-centric recommendations for healthcare professionals and pharmaceutical companies.

Hypotheses

- Patients with chronic illnesses often feel emotionally unsupported in healthcare settings.

- Emotional support and H2H communication improve trust, satisfaction, and treatment adherence.
- Pharmaceutical communication that includes motivational or emotional content improves brand engagement.

Materials & Methods

- **Study Design:** Mixed-method approach (quantitative + qualitative).
- **Study Area:** Community-based and India-centric (responses gathered via online and offline surveys).
- **Study Population:** Adults living with chronic diseases or caregivers of such patients.
- **Sample Size:** 41 valid survey respondents.
- **Sampling Technique:** Purposive sampling.
- **Data Collection Tools:** Structured questionnaire using Google Forms.
- **Data Analysis Tools:** Microsoft Excel (quantitative) and thematic analysis (qualitative).
- **Duration of Study:** March to May 2025.

Data Analysis Plan

Quantitative data were analysed using Excel with descriptive statistics and visual charts. Qualitative data from open-ended responses were analysed using thematic coding to identify patterns in emotional needs, provider interaction quality, and patient engagement behaviours.

Ethical Considerations

- **Informed Consent:** Implied via voluntary participation in online survey.
- **Confidentiality:** No personal identifiers were collected; data used solely for academic purposes.
- **Voluntary Participation:** Participants were free to withdraw or skip questions at any point.

References

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